

**NOTICE OF REFUND DUE**  
(Rev. & Tax. Code §5096 et seq.)

**TAX COLLECTOR'S OFFICE**

\_\_\_\_\_ **COUNTY, STATE OF CALIFORNIA**

Fiscal Year: \_\_\_\_\_

Amount of Refund: \$\_\_\_\_\_

Parcel/Account Numbers: \_\_\_\_\_

\_\_\_\_\_  
(Name)  
(Address)  
(City, State, Zip)

Dear Mr./Mrs./Ms. \_\_\_\_\_:

It appears from the records of this office that taxes for the above fiscal year, in the amount shown above, may have been:

\_\_\_\_\_ Paid more than once.

\_\_\_\_\_ Erroneously or illegally collected.

\_\_\_\_\_ Illegally assessed or levied.

\_\_\_\_\_ Paid on an assessment of improvements when the improvements did not exist on the lien date.

\_\_\_\_\_ Other reason(s): \_\_\_\_\_

\_\_\_\_\_.

A refund may be claimed pursuant to the California Revenue and Taxation Code, Division 1, Part 9, Chapter 5, sections 5096 et seq., by the person who paid the tax.

Enclosed is a form, which may be filed with \_\_\_\_\_ (name and address \_\_\_\_\_) to claim any fund due.

Cordially,

\_\_\_\_\_

\_\_\_\_\_ County Tax Collector

Enclosure